

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

FREEDOM PROJECT; THE

ADDRESS (number and street)

631 Pennsylvania Avenue SE

Suite B

☐ Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

4452

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00305805

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report(Q1)
- ☐ July 15  
Quarterly Report(Q2)
- ☐ October 15  
Quarterly Report(Q3)
- ☐ January 31  
Quarterly Report(YE)
- ☐ July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2011

through

04

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Margee Clancy

Signature of Treasurer

Electronically Filed by Margee Clancy

Date

05

20

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
FREEDOM PROJECT; THE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	71566.62
(b) Cash on Hand at Beginning of Reporting Period .....	668124.87	
(c) Total Receipts (from Line 19) .....	46988.00	924250.42
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	715112.87	995817.04
7. Total Disbursements (from Line 31) .....	73115.34	353819.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	641997.53	641997.53
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FREEDOM PROJECT; THE

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) .....	8750.00	189300.00
(ii) Unitemized .....	75.00	75.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	8825.00	189375.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	38000.00	481440.59
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	46825.00	670815.59
12. Transfers From Affiliated/Other Party Committees .....	0.00	243206.13
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	163.00	5228.70
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	46988.00	924250.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	46988.00	924250.42

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	73115.34	243619.51	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	73115.34	243619.51	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	110000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	200.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	73115.34	353819.51	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	73115.34	353819.51	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	46825.00	670815.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46825.00	670815.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	73115.34	243619.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	163.00	5228.70
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	72952.34	238390.81

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey Bear

Mailing Address 3750 Fairhaven Drive

City

West Linn

State

OR

Zip Code

97068-3771

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
JMD Architectural Products

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11AI-11112-23879-c

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John Dovich

Mailing Address 2727 Walsh Road

City

Cincinnati

State

OH

Zip Code

45208-3437

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
John D. Dovich Assoc., LLC

Occupation  
Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11AI-11164-23878-c

Amount of Each Receipt this Period

500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Stacey Dion

Mailing Address 238 12th Street SE

City

Washington

State

DC

Zip Code

20003-1428

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Boeing

Occupation  
Dir. of Govt. Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11AI-12694-23877-c

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
 William Mahoney, Jr.

Mailing Address 1 Monarch Place  
 Suite 1840

City State Zip Code  
**Springfield MA 01144-4006**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Self

Occupation  
 Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 4 / 2 8 / 2 0 1 1**

**Transaction ID: SA11AI-12695-23883-c**

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
 Kristin Barens

Mailing Address 18702 Patrician Drive

City State Zip Code  
**Villa Park CA 92861-4212**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 MullinTGB Life

Occupation  
 Insurance Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 4 / 0 1 / 2 0 1 1**

**Transaction ID: SA11AI-12697-23904-c**

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
 William Kirk Blalock

Mailing Address 609 W Braddock Road

City State Zip Code  
**Alexandria VA 22302-4104**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Fierce, Isakowitz & Blalock

Occupation  
 Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 4 / 2 8 / 2 0 1 1**

**Transaction ID: SA11AI-3825-23880-c**

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

8750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 AMERICAN FINANCIAL SERVICES ASSOCIATION PAC (AFSA PAC)

Mailing Address 919 18th Street NW

City State Zip Code  
 Washington DC 20006-5503

FEC ID number of contributing  
federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11C-4241-23882-c

Amount of Each Receipt this Period

5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
 Association For Advanced Life Underwriting Pac (aalu Pac)

Mailing Address 2901 Telestar Court  
 Floor 4

City State Zip Code  
 Falls Church VA 22042-1260

FEC ID number of contributing  
federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11C-11135-23848-c

Amount of Each Receipt this Period

5000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
 BRIDGESTONE AMERICAS HOLDING INC. POLITICAL ACTION COMMITTEE

Mailing Address 607 14th Street NW  
 Suite 500

City State Zip Code  
 Washington DC 20005-2023

FEC ID number of contributing  
federal political committee. **C** C00371948

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11C-3696-23849-c

Amount of Each Receipt this Period

3000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

13000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 32

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Cisco Systems E-PAC

Mailing Address 20 Park Road  
Suite E

City State Zip Code  
Burlingame CA 94010-4443

FEC ID number of contributing  
federal political committee.

**C** C00362707

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11C-10215-23881-c

Amount of Each Receipt this Period

5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Home Depot Inc. Political Action Committee

Mailing Address 101 Constitution Avenue NW  
Suite 800W

City State Zip Code  
Washington DC 20001-2127

FEC ID number of contributing  
federal political committee.

**C** C00284885

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11C-9086-23885-c

Amount of Each Receipt this Period

5000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS (FIREPAC)

Mailing Address 1750 New York Avenue NW

City State Zip Code  
Washington DC 20006-5301

FEC ID number of contributing  
federal political committee.

**C** C00029447

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11C-3627-23884-c

Amount of Each Receipt this Period

2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 32

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC.

Mailing Address 1501 K Street NW  
Suite 350

City State Zip Code  
Washington DC 20005-1412

FEC ID number of contributing  
federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11C-4237-23887-c

Amount of Each Receipt this Period

5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Snr Denton Us Llp Political Action Committee

Mailing Address 1301 K Street NW  
Suite 600

City State Zip Code  
Washington DC 20005-3317

FEC ID number of contributing  
federal political committee. **C** C00216127

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11C-12679-23850-c

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 Bren Road E

City State Zip Code  
Minnetonka MN 55343-9664

FEC ID number of contributing  
federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11C-5443-23886-c

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....

38000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Authorize.net Mailing Address 808 East Utah Dr.	<b>Transaction ID:</b> SB21B-11844-23910-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 4 / 2 0 1 1</div> </div>
City American Fork State UT Zip Code 84003 Purpose of Disbursement Merchant fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>72.90</div> <div>001</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Axiom Strategies,LLC Mailing Address 1241 NW Briarcliff Pkwy. Suite 85 City Kansas City State MO Zip Code 64116 Purpose of Disbursement TFP mtg. evt exp. food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-12680-23852-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 8 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3000.00</div> <div>001</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st Street SE City Washington State DC Zip Code 20003-1801 Purpose of Disbursement TFP mtg. exp. food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-5501-23853-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 8 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>101.24</div> <div>001</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**3174.14**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Chain Bridge Bank</p> <p>Mailing Address 1445 Laughlin Avenue Suite A</p> <p>City Mclean State VA Zip Code 22101-5737</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-10391-23875-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2487.14"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Chain Bridge Bank</p> <p>Mailing Address 1445 Laughlin Avenue Suite A</p> <p>City Mclean State VA Zip Code 22101-5737</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-10391-23876-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="88.34"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Chain Bridge Bank</p> <p>Mailing Address 1445 Laughlin Avenue Suite A</p> <p>City Mclean State VA Zip Code 22101-5737</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-10391-23907-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="134.71"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2710.19**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
Suite A

City Mclean State VA Zip Code 22101-5737

Purpose of Disbursement

Payroll taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10391-23903-e

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

1881.99

**B.**

Full Name (Last, First, Middle Initial)

Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
Suite A

City Mclean State VA Zip Code 22101-5737

Purpose of Disbursement

Bank fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10391-23914-e

Date of Disbursement

04 / 30 / 2011

Amount of Each Disbursement this Period

98.10

**C.**

Full Name (Last, First, Middle Initial)

Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City Middletown State OH Zip Code 45042-3806

Purpose of Disbursement

Payroll processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-6282-23864-e

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

65.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2045.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City Middletown State OH Zip Code 45042-3806

Purpose of Disbursement  
Payroll processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-6282-23889-e  
Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

65.00

**B.**

Full Name (Last, First, Middle Initial)  
Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City Middletown State OH Zip Code 45042-3806

Purpose of Disbursement  
Payroll processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-6282-23890-e  
Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

65.00

**C.**

Full Name (Last, First, Middle Initial)  
Commonwealth of Virginia

Mailing Address PO Box 27264

City Richmond State VA Zip Code 23261-7264

Purpose of Disbursement  
Payroll taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-8564-23891-e  
Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

254.24

**SUBTOTAL** of Disbursements This Page (optional) .....

384.24

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.** Full Name (Last, First, Middle Initial)  
Department of Employment Services

Mailing Address PO Box 96664

City Washington State DC Zip Code 20090-6664

Purpose of Disbursement

Payroll taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-4076-23892-e  
Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

506.71

**B.** Full Name (Last, First, Middle Initial)  
Direct TV

Mailing Address PO Box 60036

City Los Angeles State CA Zip Code 90060-0036

Purpose of Disbursement

Satellite TV

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-11147-23854-e  
Date of Disbursement

04 / 18 / 2011

Amount of Each Disbursement this Period

96.56

**C.** Full Name (Last, First, Middle Initial)  
Epiphany Productions

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement

Gen. fund. consulting

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-8930-23855-e  
Date of Disbursement

04 / 18 / 2011

Amount of Each Disbursement this Period

6500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7103.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Federal Express

Mailing Address PO Box 693

City State Zip Code  
Memphis TN 38101-0693

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-5079-11281-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

321.85

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**B.**

Full Name (Last, First, Middle Initial)  
Delta Air Lines

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320-6001

Purpose of Disbursement  
Gen. fund. travel airfare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-5296-11299-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

1802.60

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**C.**

Full Name (Last, First, Middle Initial)  
Hertz Corporation

Mailing Address PO Box 26141

City State Zip Code  
Oklahoma City OK 73126-0141

Purpose of Disbursement  
Gen. fund. travel car rental

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-5347-11303-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

374.89

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Congressional Liquors

Mailing Address 404 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement  
Gen. fund. beverage

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-6678-11295-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

743.53

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**B.**

Full Name (Last, First, Middle Initial)  
123 Together.com

Mailing Address 111 S Bedford Street  
Suite 200

City Burlington State MA Zip Code 01803-5145

Purpose of Disbursement  
Internet

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-10075-11285-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

79.23

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**C.**

Full Name (Last, First, Middle Initial)  
Alamo Rent-A-Car

Mailing Address 4600 International Gateway

City Columbus State OH Zip Code 43219-1779

Purpose of Disbursement  
Gen. fund. travel airfare

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-10078-11304-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

364.60

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Sonoma

Mailing Address 223 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement  
Gen. fund. food & bev.

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-10482-11308-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

575.90

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**B.**

Full Name (Last, First, Middle Initial)  
Teleflora

Mailing Address PO Box 60910

City Los Angeles State CA Zip Code 90060-0910

Purpose of Disbursement  
Gift exp. flowers

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-10871-11296-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

249.88

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**C.**

Full Name (Last, First, Middle Initial)  
Ramparts

Mailing Address 1700 Fern Street

City Alexandria State VA Zip Code 22302-2605

Purpose of Disbursement  
TFP mtg. exp. food & bev.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-11985-11297-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

284.61

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

AT&T Data

Mailing Address 785 7th Street NW

City Washington State DC Zip Code 20001-3715

Purpose of Disbursement

Data service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12409-11283-V

Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**B.**

Full Name (Last, First, Middle Initial)

Ba Bay

Mailing Address 633 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement

TFP mtg. exp. food & bev.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12555-11284-V

Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

111.30

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**C.**

Full Name (Last, First, Middle Initial)

Mastercard

Mailing Address PO Box 42070

City Middletown State OH Zip Code 45042-0070

Purpose of Disbursement

Credit card (see memo entries)

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-3605-23862-e

Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

12091.78

**SUBTOTAL** of Disbursements This Page (optional) .....

12091.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Clear

Mailing Address 4400 Carillon Point

City State Zip Code  
Kirkland WA 98033-7353

Purpose of Disbursement  
Internet

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12559-11292-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

130.00

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**B.**

Full Name (Last, First, Middle Initial)  
Accurate Word LLC

Mailing Address 4481 White Plains Lane

City State Zip Code  
White Plains MD 20695-3018

Purpose of Disbursement  
Printing, letterhead

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12681-11282-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

1266.06

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**C.**

Full Name (Last, First, Middle Initial)  
Acqua

Mailing Address 212 7th Street SE

City State Zip Code  
Washington DC 20003-4311

Purpose of Disbursement  
TFP mtg. exp. food & bev.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12682-11286-V  
Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

464.10

**[MEMO ITEM]**

Subitemization of Mastercard ( 04/19/11 )

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Marriott Mailing Address 110 S Eutaw Street	<b>Transaction ID:</b> SB21B-12683-11290-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 9 / 2 0 1 1</div> </div>
City Baltimore State MD Zip Code 21201-1608 Purpose of Disbursement TFP reception, food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>3625.42</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 04/19/11 )
<b>B.</b> Full Name (Last, First, Middle Initial) W. Millar & Company Mailing Address 1335 14th Street NW City Washington State DC Zip Code 20005-3610 Purpose of Disbursement Gen. fund., food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-12684-11291-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 9 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>723.30</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 04/19/11 )
<b>C.</b> Full Name (Last, First, Middle Initial) Trattoria Alberto Mailing Address 506 8th Street SE City Washington State DC Zip Code 20003-2834 Purpose of Disbursement TFP mtg. exp. food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-10171-11293-V <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 9 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>94.85</div> <b>[MEMO ITEM]</b> Subitemization of Mastercard ( 04/19/11 )
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Moby Dick Airways	<b>Transaction ID:</b> SB21B-12698-23911-e <b>Date of Disbursement</b>																				
Mailing Address 23800 Wind Sock Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	5		2	0	1	1												
City Sterling State VA Zip Code 20166-7527	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gen. fund. travel airfare Candidate Name	<table border="1"> <tr> <td colspan="10">5762.00</td> </tr> </table>	5762.00																			
5762.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee	<b>Transaction ID:</b> SB21B-7991-23860-e <b>Date of Disbursement</b>																				
Mailing Address 320 1st Street SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	8		2	0	1	1												
City Washington State DC Zip Code 20003-1838	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gen. fund., usual and normal travel reim Candidate Name National Republican Congressional Committee	<table border="1"> <tr> <td colspan="10">1725.19</td> </tr> </table>	1725.19																			
1725.19																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) NJI New Media, LLC	<b>Transaction ID:</b> SB21B-11448-23905-e <b>Date of Disbursement</b>																				
Mailing Address 201 King Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	1												
City Alexandria State VA Zip Code 22314-6600	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Website contribution processing Candidate Name	<table border="1"> <tr> <td colspan="10">40.00</td> </tr> </table>	40.00																			
40.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

7527.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) NJ New Media, LLC	<b>Transaction ID:</b> SB21B-11448-23856-e <b>Date of Disbursement</b>																				
Mailing Address 201 King Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	8		2	0	1	1												
City Alexandria State VA Zip Code 22314-6600	Amount of Each Disbursement this Period																				
Purpose of Disbursement TFP website develop. & maintenance Candidate Name	<table border="1"> <tr> <td colspan="10">9600.00</td> </tr> </table>	9600.00																			
9600.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Office of Tax and Revenue	<b>Transaction ID:</b> SB21B-4077-23893-e <b>Date of Disbursement</b>																				
Mailing Address PO Box 96385	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	1	1												
City Washington State DC Zip Code 20090-6385	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">625.00</td> </tr> </table>	625.00																			
625.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Reflections Properties	<b>Transaction ID:</b> SB21B-11115-23861-e <b>Date of Disbursement</b>																				
Mailing Address 631 Pennsylvania Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	1	1												
City Washington State DC Zip Code 20003-4303	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office rent Candidate Name	<table border="1"> <tr> <td colspan="10">2295.00</td> </tr> </table>	2295.00																			
2295.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**12520.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)  
Verizon

Mailing Address PO Box 17577

City Baltimore State MD Zip Code 21297-0513

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-8324-23857-e  
Date of Disbursement

04 / 18 / 2011

Amount of Each Disbursement this Period

818.77

B.

Full Name (Last, First, Middle Initial)  
Washington Courier

Mailing Address 5520 Cherokee Avenue  
Suite 120

City Alexandria State VA Zip Code 22312-2319

Purpose of Disbursement  
Courier

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-9969-23858-e  
Date of Disbursement

04 / 18 / 2011

Amount of Each Disbursement this Period

184.35

C.

Full Name (Last, First, Middle Initial)  
Whatman Associates, Inc.

Mailing Address 6650 Stoffer Rd.

City Bellville State OH Zip Code 44813

Purpose of Disbursement  
Political strategic consulting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12568-23851-e  
Date of Disbursement

04 / 18 / 2011

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

6003.12

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Wiley Rein LLP

Mailing Address 1776 K Street NW

City  
Washington

State  
DC

Zip Code  
20006-2304

Purpose of Disbursement  
Legal services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3634-23859-e  
Date of Disbursement

04 / 18 / 2011

Amount of Each Disbursement this Period

5000.88

**B.**

Full Name (Last, First, Middle Initial)

Kevin Boland

Mailing Address 1360 E Capitol Street NE

City  
Washington

State  
DC

Zip Code  
20003-1533

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-12563-23865-e  
Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

384.05

**C.**

Full Name (Last, First, Middle Initial)

Kevin Boland

Mailing Address 1360 E Capitol Street NE

City  
Washington

State  
DC

Zip Code  
20003-1533

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-12563-23894-e  
Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

384.05

**SUBTOTAL** of Disbursements This Page (optional) .....

5768.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

John Criscuolo

Mailing Address 1845 A Street SE

City  
Washington

State  
DC

Zip Code  
20003-1706

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-10858-23866-e  
Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

350.21

**B.**

Full Name (Last, First, Middle Initial)

John Criscuolo

Mailing Address 1845 A Street SE

City  
Washington

State  
DC

Zip Code  
20003-1706

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-10858-23895-e  
Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

350.21

**C.**

Full Name (Last, First, Middle Initial)

Sean Finnerty

Mailing Address 3850 Tunlaw Road NW  
Apt. 606

City  
Washington

State  
DC

Zip Code  
20007-4837

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-12696-23906-e  
Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

557.96

**SUBTOTAL** of Disbursements This Page (optional) .....

1258.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Sean Finnerty

Mailing Address 3850 Tunlaw Road NW  
Apt. 606

City Washington State DC Zip Code 20007-4837

Purpose of Disbursement

Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12696-23896-e

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

557.97

B.

Full Name (Last, First, Middle Initial)

Nicholas Flocken

Mailing Address 35400 Pheasant Court

City Solon State OH Zip Code 44139-2465

Purpose of Disbursement

Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12692-23863-e

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

350.21

C.

Full Name (Last, First, Middle Initial)

Nicholas Flocken

Mailing Address 35400 Pheasant Court

City Solon State OH Zip Code 44139-2465

Purpose of Disbursement

Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12692-23888-e

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

350.21

SUBTOTAL of Disbursements This Page (optional) .....

1258.39

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Cory Fritz Mailing Address 1360 E Capitol Street NE	<b>Transaction ID:</b> SB21B-12693-23867-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 1 1</div> </div>
City Washington State DC Zip Code 20003-1533 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>779.33</div> <div>001</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Cory Fritz Mailing Address 1360 E Capitol Street NE	<b>Transaction ID:</b> SB21B-12693-23868-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 1 1</div> </div>
City Washington State DC Zip Code 20003-1533 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>779.33</div> <div>001</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Cory Fritz Mailing Address 1360 E Capitol Street NE	<b>Transaction ID:</b> SB21B-12693-23897-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 9 / 2 0 1 1</div> </div>
City Washington State DC Zip Code 20003-1533 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>779.33</div> <div>001</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**2337.99**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11116-23869-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="432.59"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11116-23898-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="432.59"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Robyn Knecht</p> <p>Mailing Address 1438 Meridian Place NW</p> <p>City Washington State DC Zip Code 20010-1962</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-12629-23870-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="353.21"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1218.39**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Robyn Knecht	<b>Transaction ID:</b> SB21B-12629-23899-e <b>Date of Disbursement</b>																				
Mailing Address 1438 Meridian Place NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	1	1												
City Washington State DC Zip Code 20010-1962	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">353.20</td> </tr> </table>	353.20																			
353.20																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Mcgrann	<b>Transaction ID:</b> SB21B-4052-23871-e <b>Date of Disbursement</b>																				
Mailing Address 150 N Carolina Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	1												
City Washington State DC Zip Code 20003-1841	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">1542.67</td> </tr> </table>	1542.67																			
1542.67																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Mcgrann	<b>Transaction ID:</b> SB21B-4052-23872-e <b>Date of Disbursement</b>																				
Mailing Address 150 N Carolina Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	1												
City Washington State DC Zip Code 20003-1841	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">1542.66</td> </tr> </table>	1542.66																			
1542.66																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3438.53**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Kevin McGrann

Mailing Address 150 N Carolina Avenue SE

City Washington State DC Zip Code 20003-1841

Purpose of Disbursement

Payroll

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-4052-23900-e

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

1542.66

B.

Full Name (Last, First, Middle Initial)

Christopher McNulty

Mailing Address 44047 Lords Valley Terrace

City Ashburn State VA Zip Code 20147-3203

Purpose of Disbursement

Payroll

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12591-23873-e

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

619.37

C.

Full Name (Last, First, Middle Initial)

Christopher McNulty

Mailing Address 44047 Lords Valley Terrace

City Ashburn State VA Zip Code 20147-3203

Purpose of Disbursement

Payroll

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-12591-23901-e

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

619.38

SUBTOTAL of Disbursements This Page (optional) .....

2781.41

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Caitlin Wohlfarth

Mailing Address 1808 N Quinn Street

City  
Arlington

State  
VA

Zip Code  
22209-1335

Purpose of Disbursement  
Payroll

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-11845-23874-e

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

646.50

**B.**

Full Name (Last, First, Middle Initial)

Caitlin Wohlfarth

Mailing Address 1808 N Quinn Street

City  
Arlington

State  
VA

Zip Code  
22209-1335

Purpose of Disbursement  
Payroll taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-11845-23902-e

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

646.49

**SUBTOTAL** of Disbursements This Page (optional) .....

1292.99

**TOTAL** This Period (last page this line number only) .....

72914.08